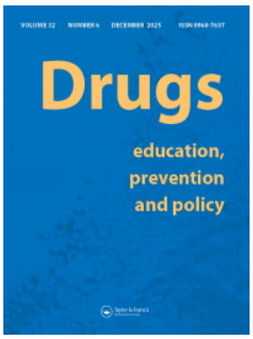

Drugs: Education, Prevention and Policy

ISSN: 0968-7637 (Print) 1465-3370 (Online) Journal homepage: www.tandfonline.com/journals/idep20

How and why consensus fractured at the 2024 session of the UN Commission on narcotic drugs: an exploratory study of international drug policy constellations using social network analysis and qualitative comparative analysis

Alex Stevens, Felipe Krause & Martin Bouchard

To cite this article: Alex Stevens, Felipe Krause & Martin Bouchard (05 Dec 2025): How and why consensus fractured at the 2024 session of the UN Commission on narcotic drugs: an exploratory study of international drug policy constellations using social network analysis and qualitative comparative analysis, Drugs: Education, Prevention and Policy, DOI: 10.1080/09687637.2025.2590649

To link to this article: https://doi.org/10.1080/09687637.2025.2590649

DRUGS: EDUCATION, PREVENTION AND POLICY
https://doi.org/10.1080/09687637.2025.2590649

How and why consensus fractured at the 2024 session of the UN Commission on narcotic drugs: an exploratory study of international drug policy constellations using social network analysis and qualitative comparative analysis

Alex Stevens[a], Felipe Krause[b] and Martin Bouchard[c]

[a]School of Law, University of Sheffield, Sheffield, UK; [b]Latin American Centre, University of Oxford, Oxford, UK; [c]School of Criminology, Simon Fraser University, Vancouver, Canada

ABSTRACT

Background: Consensus in international drug policy has fractured. It would be useful to explain how and why this occurred.

Aim: This exploratory study develops and tests theory and methods for describing and explaining constellations of policy actors and positions in international drug policy.

Methods: This article applies the policy constellations approach. It uses social network analysis (SNA) of the statements made by countries at the 2024 Commission on Narcotic Drugs, combined with a qualitative comparative analysis (QCA) of the data on countries' value orientations and national levels of human development.

Results: A network analysis of the statements made at the Commission revealed two constellations of countries in the data: the 'liberal' and 'traditionalist' constellations. In QCA, after excluding Latin American countries, we find that a population's level of emancipative values may have a causal effect on membership of these policy constellations; countries with high emancipative values are usually in the liberal constellation, and countries with low emancipative values are usually in the traditionalist constellation.

Conclusion: It is possible to use SNA and QCA to identify policy constellations in international drug policy discussions and to provide a provisional explanation of why countries (outside Latin America) adopt the policy positions they do.

ARTICLE HISTORY
Received 29 August 2025
Revised 12 November 2025
Accepted 12 November 2025

KEYWORDS
International drug policy; policy constellations; values; social network analysis; qualitative comparative analysis

Introduction

The fracturing of the international consensus on drug policy, as discussed by Bewley-Taylor (2012), has gathered pace in recent years. In 2024, unprecedented conflict between members states occurred at the 67th meeting of the United Nations Commission on Narcotic Drugs (CND) in Vienna. Different groups of countries put out competing joint statements, and—for the first time since 1992 (UN, 1992)—votes were called on resolutions, rather than passing them by unanimous consensus (Fordham, 2024). This creates a fascinating opportunity to develop and test theory and methods to describe and explain the fracturing of the 'Vienna consensus' in international drug policy.

This article uses the policy constellations approach to study the 2024 CND through the use of social network analysis (SNA), as was previously done for the drug policy fields of the UK and Scotland (Stevens, 2024). It also, for the first time, applies the techniques of qualitative comparative analysis (QCA, Ragin, 2008; Rihoux and Ragin, 2009) to the study of policy constellations. The aim is to use this exploratory analysis to develop better explanations of the international drug policy process by testing out whether these methods can provide plausible and useful descriptions and explanations of why countries take the positions they do in international drug policy debates. This combination of a new theoretical approach with a novel combination of research methods contributes to the growing, international interest in the role of moralities in drug policy (Stevens et al., 2025), in a way that may expand the scope of what drug policy research is and does (Ritter & Bunyon, 2025).

CONTACT Alex Stevens Alex.stevens@sheffield.ac.uk School of Law, University of Sheffield, Bartolome House, Winter Street, Sheffield, UK.
Supplemental data for this article can be accessed online at https://doi.org/10.1080/09687637.2025.2590649.

The Commission on Narcotic Drugs

The CND is the official forum for the formulation of international policy on illicit drugs. It was established in 1946 by the UN's Economic and Social Council in order to supervise the application of international drug control treaties. It meets annually in Vienna. It is chaired by a 'bureau' which represents the regions of the UN. Secretariat to the CND is provided by the United Nations Office on Drugs and Crime (UNODC).

In the formative years of the UN drug control system, it was structured by geopolitics. The USA took a leading role in creating the contemporary system for drug control (Bewley-Taylor, 1999; McAllister, 2000; Nadelmann, 1990), but it was not the only player in this process (Collins, 2021b). Other countries, including Egypt and China, played crucial roles (Kozma, 2011; Seddon, 2023; Windle, 2013). Mostyn (2024) argues that the creation of an international consensus on drug prohibition in the 1980s was part of the process of ending the cold war between western liberal democracies and the Soviet Union. Latin American countries were also early adopters and international advocates for rigid prohibition; often while they were under authoritarian rule (Gootenberg & Campos, 2015).

In the past, meetings of the CND strove for unanimity, in what was known as the 'Vienna consensus'; a consensus that had become increasingly strained (Bewley-Taylor, 2012; Boister, 2016). Countries have diverged over specific issues (e.g. use of the death penalty, cannabis legalization, and 'harm reduction'[1]), as well as in their attitudes toward the international drug control system itself (Collins, 2021b). Collins suggests the presence of at least two groupings of countries, which he labels as reform and conservative integrationists, with competing interpretations of the UN drug conventions.

The 2024 meeting of CND was divided into the 'high level segment' (14th and 15th March) and the 'regular session' (18th to 22nd March). During the high level segment, the CND adopted—by consensus—an outcome statement laying out collective commitments on drug policy, following the 'midterm review' of the 2019 ministerial declaration (CND, 2019).

At the 2024 CND, two groups of countries put out conflicting statements in addition to their joint support of the official outcome statement. The first group was led by the delegation of Colombia. It supported a range of more progressive approaches in drug policy, including respect for human rights, a gender perspective, equality for people of African descent and indigenous communities, and explicit support for harm reduction. This was met by a counter-statement, led by the Russian delegation. This instead called for compliance with the traditional prohibitionist interpretation of the international drug conventions, and for 'harm prevention' instead of harm reduction (Fordham, 2024). No countries supported both statements, although some signed themselves up to neither of them. This self-sorting of countries into two groups (that supported either the Colombian-led or the Russian-led statement) enables us to test the reliability of the methods presented below for identifying constellations of policy actors.

Here, we set out to answer the questions of how and why consensus fractured at the 2024 CND, by testing whether it is possible to use the statements made by countries at CND to identify constellations of countries and the policy positions they support. We also provide a provisional explanation of why different countries are in different policy constellations on either side of the fracture in international drug policy discussions.

The policy constellations approach

The policy constellations approach (PCA, Stevens, 2024) builds on previous theories of the policy process (Sabatier & Weible, 2018; Stevens, 2023); primarily the advocacy coalitions framework of Sabatier and Jenkins-Smith (1993). To this framework, it adds critical realist assumptions on the ontology of causal mechanisms, and a particular focus on the role of moralities in influencing policy decisions (Stevens, 2024). Policy constellations are fluid sets of actors involved in concerted (but not necessarily coordinated) action toward the achievement of shared policy goals that suit their normative preferences and material interests. In the PCA, these moral preferences are called ethico-political bases, because the normative foundations that motivate action to influence policies are both ethical and political in nature (Haidt, 2012). In the PCA, following the critical realist, morphogenetic social theory of Margaret Archer (2000), these ethico-political bases are thought of as underlying cultural structures that motivate human action.

The PCA provides ten propositions for thinking about drug policy making. It has been applied to drug policy making in the UK, Poland, Mexico, and the Philippines (Lasco & Abesamis, 2025; Los, 2023a, 2023b; Stevens, 2024; von Hoffmann, 2024). It has not yet been tested and developed at the international level of drug policy making. It provides a theory and methods for analyzing the concerted (if not necessarily coordinated) operation of policy actors. The PCA's first proposition states that '[t]he policy preferences of policy actors will be deeply shaped by the ethico-political

bases that they adhere to' (Stevens, 2024, p. 161). Its seventh states that '[p]olicy change can occur when the preferences, powers and/or contexts of policy actors change.' These propositions in particular guide the analysis we present here.

The term 'constellation' is also used by Gholiagha et al.'s (2020) study of international drug policymaking, using the case of coca leaf to examine 'norm collisions,' defined as situations where actors perceive two norms as incompatible. Here, the clash was between the prohibition of coca by the 1961 Single Convention on Narcotic Drugs and the protection of indigenous practices—including coca chewing in the Andes—under the 2007 UN Declaration on the Rights of Indigenous Peoples. Rather than finding 'value-driven networks' or a broader transnational campaign, Gholiagha et al. emphasize the role of ad hoc state constellations as central norm entrepreneurs. The limited resonance of coca beyond the Andes helps explain the absence of a wider coalition (Jelsma, 2011), but Gholiagha et al. also show that even sympathetic actors offered only muted support, reflecting the power of prohibitionist morality and the reluctance of many states, NGOs, and indigenous rights advocates to risk their legitimacy by engaging deeply in drug policy reform. This dynamic underscores a key insight of the policy constellations approach: that the moral meanings attached to drugs and prohibition shape not only state positions but also the very possibilities for coalition-building, making the PCA a more useful lens for analyzing international drug policy than frameworks - such as the advocacy coalition framework - that presuppose close coordination within coalitions.

The first step of a PCA analysis is to identify the constellations of policy actors in a particular policy field, by examining which policy actors support which policy positions. The next step is to identify the underlying ethico-political bases of these policy positions. The PCA approach considers policy positions that are similar to be 'connected,' and proceeds to create a network of connections (known in SNA as 'ties') between countries and their policy positions. This article covers these steps first by analyzing countries' statements at the 2024 CND to see which countries supported which policy positions. Identifying the ties between these countries and policy positions enables us to map the social network formed by the ties between countries and the policy positions they supported in their statements. We visualize this social network in a sociogram, and also use the modularity statistics to identify two competing policy constellations at the 2024 CND. We then use QCA to provide a provisional explanation of why countries are members of each of these policy constellations. We do this by using data from the World Values Survey (WVSA, 2020) to analyze whether the value orientations held by countries' populations can help explain which countries support policy positions that place them in different policy constellations at the 2024 CND. In this QCA, we also include data on countries' level of human development, in case this has an influence on countries' membership of different policy constellations.

Methods

Data

Data for the SNA are the statements given by country representatives during the high level segment of the CND's 67th session in March 2024, which the lead author attended in person. There were 99 such statements made by countries in their own right (excluding those made on behalf of groups of countries or international agencies). National representatives that spoke included ministers, ambassadors, and other high-level officials. They were invited to speak for five minutes each, although they sometimes over-ran their allotted time.

The statements are themselves products of deliberation between multiple authors. They will have been negotiated between the various ministries that are involved in drug policy, and within the administrative units that are responsible for producing such documents. Individual policy actors may have positions that diverge from these negotiated statements. For example, the UK's statement was given by the junior Home Office minister for policing, Chris Philps MP. His oral statement was somewhat different to the written statement submitted to the secretariat. He went off-piste to promise a 'zero tolerance' approach to recreational drug use and jettisoned parts of the prepared statement about progress made in the devolved nations of the UK. The US Secretary of State, Antony Blinken, and many other speakers stayed much closer to their published scripts.

For our analysis, we used the prepared scripts where they were available in English. For statements that were provided in other languages, we used transcripts of the simultaneous interpretation of the statements that was provided at the meeting and made available on the online *Journal of the United Nations for Vienna,* which also provides copies of the written statements.[2]

To explore the relationship between the policy positions expressed in countries' statement to the 2024 CND and the moralities held by these countries' populations, we use QCA of the results of the SNA alongside data on national-level value orientations taken

from the seventh wave of the World Values Survey (WVSA, 2020).

The WVS's seventh wave asked over 80,000 participants in 64 countries about their moral beliefs between the years 2017 and 2022. Their responses to these questions were reduced to two dimensions in factor analysis by the WVS research team, which made the WVS data and factor analysis available for others to use. One of these dimensions was labeled 'emancipative' (as opposed to 'obedient') values. People with high levels of emancipative values tend to believe in equal opportunities and the freedom to express their individuality. People with low levels tend to believe in the importance of conformity to collective norms and traditions (Welzel, 2013). The WVS does not ask directly about attitudes toward illicit drug use, but it does include questions on other controversial policies, including on homosexuality, euthanasia, divorce, prostitution, suicide, and abortion. Responses on such issues are highly loaded on the dimension of emancipative values, and can be expected to be in line with liberal or traditionalist attitudes to illicit drug use.

The second dimension identified in factor analysis of responses to the WVS relates to 'secular' (as opposed to 'sacred') values. This expresses the difference between people who root their beliefs in rational and critical thought compared to those who adhere to religious beliefs (Norris & Inglehart, 2011).[3] WVS questions that load heavily on the secular-sacred dimensions cover issues including religiosity, national pride, respect for authority, and traditional family values.

We considered it possible that levels of human development may affect countries' attitudes toward various policies, including drugs, so we also included the countries' values on the UN Development Program's 2022 Human Development Index in the QCA (UNDP, 2024).

Two mode social network analysis

SNA enables the visualization of connections between policy actors and policy positions in a specified policy field (Stevens, 2024). Here the policy actors are countries, and the policy positions are those that they endorsed in their statements to the 2024 CND.

We followed the steps laid out by Stevens (2023) to create the node list of these countries (mode 1 nodes) and policy positions (mode 2 nodes) and of which countries supported which positions (the edge list of the ties between nodes of modes 1 and 2), based on coding of the countries' statements, which we carried out using Nvivo software. For this coding, we read through the statements and coded the positions that countries supported by highlighting the words they used to do so. Our selection of words and terms to code was informed by natural language processing of the country statements, which is reported elsewhere (Stevens et al., 2024). We then systematically searched the statement for mentions of these words, and relevant combinations (e.g. 'reduction of supply' as well as 'supply reduction'). We checked that each mention of these words was actually an instance of support of that position (e.g. that the words were not being used to express opposition to that position). We also coded some commonly used phrases that expressed a particular way of thinking about drug policy. This included the ideas that drugs are a 'scourge' and there is a need for 'common and shared responsibility' in international drug policy in order to create a 'drug free' world, or—conversely - that global drug prohibition is 'failing.'

We coded the 99 country statements to 41 policy positions. These included some explicit calls for action (e.g. to abolish the death penalty, or for a 'zero tolerance' approach), as well as implicit endorsements (e.g. showing support for rehabilitation by reporting how many rehabilitation centers the country had opened). The use of some words—like reports of the numbers of drug seizures—were also coded as policy positions because they indirectly reflect a way of thinking about drug policy (e.g. reporting the number of seizures is an indirect way for a country to say that is supports seizing drugs as a way of reducing drug problems).

There were three policy positions that were so commonly supported that they obscured clustering on other positions in the SNA; support for drug prevention, for drug treatment, and for human rights. Coded mentions of support for prevention, treatment and human rights were therefore excluded from the SNA. These are universally shared positions that are enshrined in the UN's international drug conventions and human rights treaties. The contexts within which these words were used in the statements confirmed that 'there remain deep definitional and normative divergences between those using the same terms' in international drug policy debates (Collins, 2021a, p. 7). For example, the Russian statement endorsed the call for human rights, but did so in the context of calling for the right to live free of drugs. This was a very different interpretation of human rights from that provided by Switzerland, which emphasized 'abolition of the death penalty, in particular for drug related crimes, prohibition of torture, or cruel, inhuman or degrading treatment, prohibition of discrimination, the right to a private life, [and] the right to health.' Some coded policy positions (e.g. support for heroin assisted treatment) were only mentioned by one country. These were also excluded from the SNA, as they provided no

information about relationships between countries. This left 38 policy positions in the SNA.

Three country statements—by Armenia, Ireland, and Israel—only mentioned one policy position that was also mentioned by other countries, and so were also excluded from the SNA. A full list of the 97 countries and the 39 policy positions that were included in the SNA is provided in supplementary appendix A.

Using the Gephi software package, we carried out SNA. We laid the sociogram out using the Force Atlas 2 layout (Jacomy et al., 2014). In this sociogram, countries find themselves close together if their statements support several of the same positions, or those that are supported by other actors who support some of the same positions. Countries and positions that share no common ties find themselves placed far apart from each other. Note that in this two mode SNA, it is the connections between countries and policy actors that determines their position in the sociogram. There were no direct ties between countries.

We used the modularity statistic in Gephi to identify those clusters of nodes in the network that shared the most ties. Gephi's modularity process is based on Blondel et al.'s (2008) algorithm for community detection. With the resolution parameter set at 1.6,[4] this identified two modules, which can also be described as constellations of policy actors and positions. As we also knew which countries had supported each of the statements led by Colombia and by Russia, we could test the concordance between the constellations identified in the SNA and the self-sorting of countries that supported each of these statements; a useful check on the reliability of the network identification of policy constellations.

Qualitative comparative analysis (QCA)

QCA is a set theoretic approach which enables systematic comparison between cases on the combinations of conditions that they exhibit and that may be necessary or sufficient to cause specified outcomes (Ragin, 2000, 2008; Rihoux & Ragin, 2009). It combines substantive knowledge of cases (in this study, the cases are countries) with computation of the degree to which they are members of the set of cases which do or do not have particular configurations of the outcome of interest (in this study, their membership of particular policy constellations) and potentially causal conditions (in this study, being high or low on emancipative values, high or low on secular values, and/or having high or low human development). For this analysis, we used the QCAPro package in the R software environment (Thiem, 2018).

QCA can use both crisp and fuzzy sets.[5] Both crisp and fuzzy forms of QCA involve calibrating data on the outcome and potentially causal conditions to assign each case with a set score (ranging from zero to one), indicating its degree of membership (from none to full) in the set of cases which have this condition. QCA then tests whether cases with particular combinations (configurations) of potentially causal conditions can consistently be considered to form supersets or subsets of the set of cases that displays the outcome of interest. This enables the identification of causal configurations that may be considered either necessary or sufficient to cause the outcome.

The strength of any such potentially causal relationship is expressed—in QCA—in terms of consistency and coverage. Both of these measures can range from zero to one. Consistency expresses the degree to which the potentially causal relationship exists across all cases (with one representing perfect consistency). Coverage approximated to the proportion of the outcome's occurrence that can be explained by the identified potentially causal configuration (known in QCA as the 'solution' of the truth table).

By producing a truth table of which combinations of potentially causal conditions are present or absent when the outcome of interest is present, QCA can identify multiple configurations that may be sufficient to cause that outcome (i.e. whenever that combination of conditions is present, the outcome of interest occurs). In order to identify the crucial conditions from the multiple configurations that may be present when the outcome occurs, QCA uses a process of Boolean minimization to exclude conditions that do not make a difference to the outcome. The most conservative and reliable explanation is produced in the 'parsimonious solution' (Baumgartner & Thiem, 2020). This assumes that possible combinations of the causal conditions that are not actually present in any of the sampled cases could have produced either value for the outcome (present or not present, one or zero) (Ragin, 2008).

The thresholds we used to calibrate fuzzy set membership scores for the potentially causal conditions are

Table 1. Thresholds used to calibrate fuzzy set scores for potentially causal conditions.

Emancipative values	
Calibration: set of countries with high emancipative values	
In	0.555
PoMU	0.455
Out	0.395
Secular/Sacred values	
Calibration: set of countries with high secular values	
In	0.435
PoMU	0.367
Out	0.29
Human Development Index 2022	
Calibration: set of countries with high human development	
In	0.8
PoMU	0.77
Out	0.665

shown in Table 1. Values of the measured condition that exceed the 'in' threshold were given a set score of one for that condition. Values that were below the 'out' threshold were given a set score of zero. Values in between the 'in' and 'out' thresholds were given a proportionate value somewhere between one and zero, while the threshold for PoMU representing the Point of Maximum Ambiguity as to whether a country was or was not a member of the relevant set (the PoMUs were selected in order to sit at empty break points near the middle of the distributions of the measured values).

We carried out separate analyses of the potential casual conditions and configurations that are consistent with being necessary or sufficient to cause a country to be a member of the liberal or traditionalist policy constellations, as assessed by the SNA of their statements to the 2024 CND.

As this study did not collect new data from human subjects, but rather used secondary analysis of publicly available data, it did not require ethical approval.

Results

Social network analysis

The sociogram of policy actors and positions is shown in Figure 1. Each dot represents a node on the network (i.e. a country or a policy position). The size of the dots depends on how many other nodes they were linked to. The largest dots are policy positions that had the widest support (apart from prevention, treatment and human rights, which were excluded from the analysis, as noted above). The lines between the dots represent which countries supported which policy position in their statements (the ties).

The modularity analysis suggested the presence of two constellations of countries according to the policy positions they supported in their statements to the CND, shown in different colors in Figure 1. The countries and policy positions which were assigned to each constellation are also shown in supplementary appendix A.

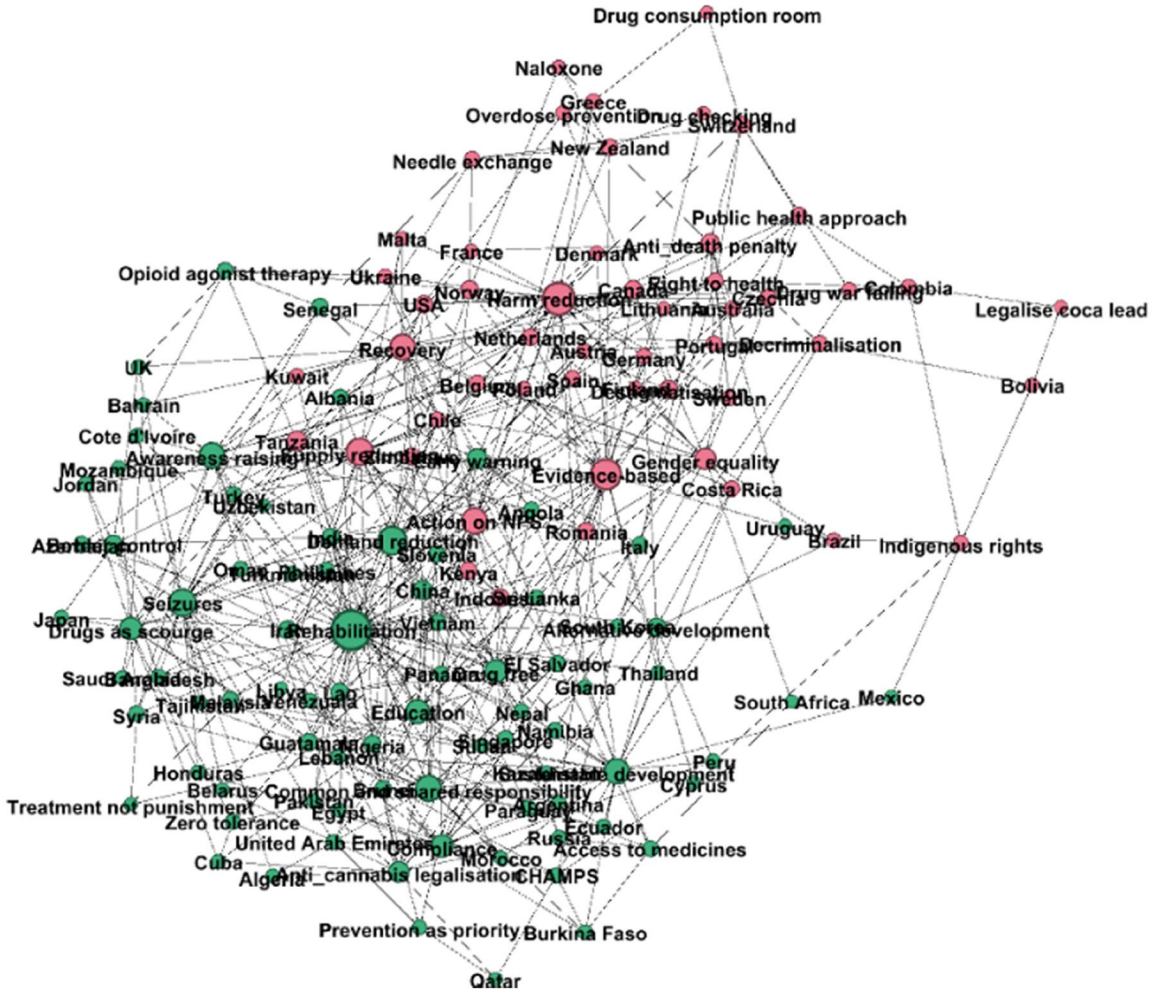

Figure 1. Sociogram of countries, policy positions and constellations (green represents the traditionalist constellation, red represents the liberal constellation).

This sociogram shows a constellation at the top right that clusters around the right to health, abolition of the death penalty, harm reduction, gender equality, decriminalization, and 'evidence-based' drug policy. This constellation included most of the countries of Western Europe, Canada, Australia, New Zealand and the USA.

At the bottom left, we find most of the countries of the Middle Eastern, Africa and Asian regions. This area of the sociogram also includes policy positions that are consistent with the pursuit of a 'drug free' world, including support for demand reduction, rehabilitation, drug seizures, border control, awareness raising, the idea of drugs as 'scourge,' and opposition to the legalization of cannabis. The UK and Italy are the only Western European countries to be placed in this constellation. The UK is dragged there by its support for border control and seizures, and the absence of support for harm reduction and other progressive measures in the British statement. Italy is placed in this constellation despite its stated support for the right to health and opposition to the death penalty because it also supported some more traditionalist policy positions, including drugs education and the idea of a 'drug free' world. As can be observed visually, both of these countries and some others are placed near the border between the two constellations due to their ties to both traditionalist and liberal drug policy positions.

We can think of these two groups as the constellations of liberal and traditionalist countries in international drug policy. This is analogous to Collins (2021a) suggestion of the conservative and reformist groupings. The policies supported by the countries at the bottom left of the sociogram are consistent with the traditional, prohibitionist interpretation of the international drug conventions. This is also suggested by their common appeals for all countries to comply with the UN drug conventions and for 'common and shared responsibility' to do so. The constellation at the top right of the sociogram includes countries who take a more liberal approach, supporting public health measures and the use of scientific evidence, rather than relying on strict compliance with prohibition.

The authoritarian regimes of Saudi Arabia, Iran, Russia and China are in the traditionalist constellation, whereas Switzerland—the pioneer of harm reduction services and prominent critic of human rights abuses—is the most extreme member of the liberal constellation, as identified from these countries' statements to the 2024 CND.

The placement of Latin American and of Central and Eastern European countries conformed less to such continental patterning. For example, Colombia and Guatemala are placed at opposite ends of the sociogram, as are Belarus and Czechia.

Of the 38 countries in the dataset for the SNA who signed up to the Colombian-led statement, 27 (79%) were placed in the liberal constellation in our SNA. Of the 38 supporters of the Russian-led statement, 34 (89%) were placed in the traditionalist constellation. The phi coefficient, measuring the strength of the association between joint statement support and constellation membership, is 0.63 (a strong correlation). This supports the reliability of our exploratory use of SNA to identify policy constellations in international drug policy discussions.

Qualitative comparative analysis

For the QCA of the configurations of conditions that may be necessary or sufficient to cause countries to be members of policy constellations, we coded constellations as crisp sets, with set scores of either one or zero for being a member of each of the two constellations that were identified in SNA; liberal or traditionalist.[6]

By looking at the sociogram in Figure 1, we saw that the placement of Latin American countries might not follow a pattern that can be explained by the value orientations that are measured by the WVS. We knew that Latin American countries tend to cluster together on the two WVS dimensions, having generally moderate levels of emancipative values and low levels of secular values (Inglehart & Welzel, 2023). This suggested that it was unlikely that these countries would contribute to the identification of a consistent relationship between value orientations and drug policy positions, so they were excluded from the QCA.[7]

Using a threshold for consistency of 0.965,[8] no set of countries with a particular condition were found to form a superset of countries with the outcome of being a member of either of the constellations. This indicates that none of the conditions in the analysis were necessary to cause constellation membership.

The truth table for which countries were classified by the SNA as members of the liberal constellation is displayed in Table 2. With the threshold for consistency set at 0.74,[9] there was only one combination of causal conditions which consistently formed a subset of countries that were members of the progressive constellation. Boolean minimization of the truth table suggested that it was the combination of high emancipative values AND high secular values that was consistent with being sufficient to cause membership of the liberal constellation. These were mostly countries that also had high human development, but note that there were several countries (including Russia and South

Table 2. Truth table and parismonious solution for being a member of the liberal constellations.

Truth table	E	S	H		Consistency
					Australia,Austria,Canada,Czechia,Denmark,Finland,France,Germany,Japan,Lithuania,
	1	1	1	0.748	***Netherlands,New Zealand,Norway,Slovenia,Spain,Sweden,Switzerland,UK,USA***
	1	0	1	0.627	Greece,*Italy*,Poland,Portugal
	0	1	1	0.232	*Belarus,China,Kazakhstan,Malaysia,Russia,South Korea,Thailand*
	0	0	1	0.219	*Albania,Cyprus,Iran*,Romania,*Singapore,Turkey*
	0	1	0	0.214	*Lebanon,Tajikistan*,Ukraine,*Vietnam*
	0	0	0	0.183	*Azerbaijan,Bangladesh,Egypt,India*,Indonesia,*Jordan*,Kenya,*Libya,Morocco,Nigeria,Pakistan, Philippines,Uzbekistan,Zimbabwe*
Parsimonious solution			Coverage	Consistency	Coverage
ES => Liberal			**0.624**	**0.748**	**0.624**

Key.
E: high emancipatory (e: low emancipatory values).
S: high secular values.
H: high human development.
Rows in bold were considered consistent with sufficient causation of constellation membership.
Undelined countries are in the liberal constellation.
Countries in italics are in the traditionalit constellation.

Korea) with relatively high human development that were not members of the liberal constellation. This suggests that high human development was not sufficient to cause a country to be part of the liberal constellation of drug policy actors as the 2024 CND.

The parsimonious solution for being a member of the liberal constellation is sensitive to the choice of the threshold for inclusion of a combination of conditions in the set of configurations which consistently had the outcome of being a member of the liberal constellation. If this threshold were set at 0.62,[10] then a second combination of conditions (that includes having low levels of secular values) would also be considered sufficient for membership of the progressive constellation (as is the case for Greece, Poland and Portugal). This would knock the condition of being high on secular values out of the parsimonious solution, leaving just high emancipative values. This suggests that having a high level of emancipative values may be the most consistent element of the explanation of why a country was part of the liberal constellation of countries at the 2024 CND.

Table 3 shows the truth table for which countries were classified by the SNA as members of the traditionalist constellation. With the threshold for consistency set at 0.76, there were four combinations of potentially causal conditions which consistently formed a subset of countries that were members of the traditionalist constellation. Boolean minimization of the truth table suggested that it was the condition of having low emancipative values that was consistent with being sufficient to cause membership of the traditionalist constellation at the 2024 CND.

Note that there were countries with both high and low levels of secular values in combinations of values that were or were not consistently present when a country was in the traditionalist constellation. But whenever the condition of being low on emancipative values was present in a combination of conditions, that combination was usually present in countries that were classified as members of the traditionalist constellation.

Taken together, these QCA results suggest that value orientations—and especially the presence or absence of emancipative values in a country's population—may be important for understanding which countries (outside Latin America) supported liberal or traditionalist policy positions at the 2024 CND.

Again, the presence of a second data point by which to differentiate liberal from traditionalist countries enables us to test how reliable our exploratory analysis is. We repeated the QCA, using as the outcomes membership of the sets of countries who supported either the Colombian-led or Russian-led group statement at the high level segment of the 2024 CND. The results of these QCA are displayed in supplementary appendix B. They are similar but not identical[11] to the results reported here, in that presence or absence of emancipative values in a country's population (as measured by the WVS) emerges as a crucial part of the potentially causal explanation of why countries (outside of Latin America) adopt the positions they do in international drug policy discussions.

Limitations

This is an exploratory analysis, and it has revealed some notable limitations—beyond the problem that not all countries who were represented at the 2024 CND participate in the WVS - which will need to be considered in future research on similar topics that uses similar methods.

Our analysis suggests a strong relationship between the value orientations that are broadly shared by the

Table 3. Truth table and parismonious solution for being a member of the traditionalist constellations.

Truth table	E	S	H	Consistency	Countries with this configuration
	0	**0**	**0**	**0.817**	***Azerbaijan,Bangladesh,Egypt,India,Indonesia,Jordan,Kenya,Libya,Morocco,Nigeria,Pakistan, Philippines,Uzbekistan,Zimbabwe***
	0	**1**	**0**	**0.786**	***Lebanon,Tajikistan,Ukraine,Vietnam***
	0	**0**	**1**	**0.781**	***Albania,Cyprus,Iran,Romania,Singapore,Turkey***
	0	**1**	**1**	**0.768**	***Belarus,China,Kazakhstan,Malaysia,Russia,South Korea,Thailand***
	1	0	1	0.373	Greece,*Italy*,Poland,Portugal
	1	1	1	0.252	Australia,Austria,Canada,Czechia,Denmark,Finland,France,Germany,*Japan*,Lithuania,Netherlands, New Zealand,Norway,*Slovenia*,Spain,Sweden,Switzerland,*UK*,USA
Parsimonious solution				Consistency	Coverage
e => Traditionalist				**0.795**	**0.799**

Key.
E: high emancipatory (e: low emancipatory values).
S: high secular values.
H: high human development.
Rows in bold were considered consistent with sufficient causation of constellation membership.
Undelined countries are in the liberal constellation.
Countries in italics are in the traditionalit constellation.

population of a country and the positions that were supported by that country's government at the 2024 CND. However, this is not a direct relationship. It is mediated by the nature of the government that is in power at any particular point, and the individual preferences of the officials who are chosen to speak at CND. For example, the positions taken by the USA in the subsequent 2025 CND (after the election of President Trump) were very different to those supported by Secretary Blinken at the 2024 CND (during the Biden administration). For this and other reasons, we would not expect to find perfect consistency in the relationships between countries' value orientations and the constellations they form at CND. Our analysis does, however, suggest that it is possible to observe such relationships at lower levels of consistency, suggesting broad patterns of connection between a population's value orientations and policy positions taken by its representatives at the CND.

It is possible that some variation between the countries' statements results from differences in how they were collected, including our reliance on the simultaneous interpretation provided at CND to create translations of the statements that were not submitted in English. The interpreters at CND are used to translating drug-related language, but it is likely that their translations missed some of the nuance of the statements in their original languages. An ideal and much more expensive study would involve native speakers of all the languages in which the statements were given participating in their analysis.

Another limitation is that this analysis relies on the researcher making multiple choices about what data to use, which policy positions to code, and how to set up the parameters of both the SNA and the QCA. For these reasons, we have documented these decisions in the article so that readers can repeat them if they want to, and judge how justified they are. A more deeply hidden problem is that the calculation of modularity in SNA (and so the identification of policy constellations and their members) can produce different results depending on both the parameter that is chosen for the resolution of modularity (which can be transparently reported) and the starting node for the calculation of modularity (which cannot, as the algorithm chooses it at random). To deal with such potential fluctuations in the calculation of modularity, we chose to use the resolution parameter and the starting node that produced the most interpretable outcome (as is common in various forms of factor analysis). This is consistent with the QCA process of using the solution that most closely combines theory and data with the researchers' substantive knowledge of the sampled cases. But it would be seen as a violation of scientific principles by more purely quantitative researchers who seek to remove qualitative judgment (or at least its appearance) from their analyses.

The exclusion of Latin American countries from the QCA represents another limitation of our analysis. While the presence of Uruguay (which has the highest level of emancipative values that are reported from any Latin American country to the WVS) in the liberal constellation supports the idea that its population's emancipative values may cause a country to adopt liberal positions at CND, this relationship is less clear for other Latin American countries. This suggests that some other condition or set of conditions will need to be found to explain the drug policy positions of Latin American countries. It may be that they are particularly prone to the vagaries of whether they have a left or right wing government at the time of the CND (von Hoffmann, 2025).

This article has not included measures of the geopolitical relationships between countries in its explanations of the positions that countries took at the 2024 CND. Previous analyses have shown how positions taken in international drug policy discussions have

been used to consolidate contests between such international power blocs (Mostyn, 2024). It may be useful to consider our results in the light of ongoing contest for global hegemony between major powers, including the USA, China, Russia and the EU. However, we consider it a strength of our exploratory analysis that it is capable of producing an explanation of the pattern of policy positions taken at the 2024 CND, even without including measures of the influence of such geopolitics. After all, it is possible that countries' value orientations underlie their membership of such power blocs as well as their drug policy positions; that culture is prior to politics (Huntington, 1993).

Discussion

These exploratory analyses have demonstrated useful methods for studying and explaining the pattern and content of countries' drug policy positions at one meeting in one week in March 2024. They cannot present the whole picture of the contemporary 'regime complex' (Collins, 2021a) of international drug policy. They do, however, provide support to a growing body of knowledge on the role of value conflict in the fragmentation of drug policy discourses (Stevens et al., 2025), including at the international level of drug policy making (Gholiagha et al., 2020; Holzscheiter et al., 2022). Some positions that countries take on drug policy may seem, from the vantage point of other countries, to be irrational, in that they are not based on the evidence that they see as best representing the realities of illicit drug use and policy. We follow Pettrachin and Hadj Abdou (2024) in suggesting that we should not consider policy actors' policy positions as 'irrational.' Rather, we need to examine the underlying rationales that inform the positions they take, and the alliances they form.

In the contradictory collective statement and votes at the 2024 meeting of the CND, we observed a hardening of what Jelsma, Bewley-Taylor and others refer to as 'soft defection.' These authors used this term to describe some countries' divergence from the traditionalist, prohibitionist interpretation of the UN drug conventions. A new constellation has formed around support for developments such as harm reduction, decriminalization and even legalization of some drugs (Jelsma et al., 2018). That defection became highly visible during the 2024 CND, and is described, mapped and explained in this article in terms of the underlying value conflicts that may be driving this fragmentation of the international consensus on illicit drugs. Such defection and value conflict became even more apparent in the multiple votes taken at the subsequent, 2025 meeting of the CND (Fordham & Cots Fernández, 2025).

The PCA has previously been operationalized through the use of discourse analysis and SNA (Stevens, 2024). Adding QCA to the mix of methods enables us to take a further step toward the explanation of why some policy actors take the positions they do, in concert with other actors. We do not argue that the underlying value positions of the populations of the member states explain all the positions and alliances that were apparent at the 2024 CND. There will be other forces at play, including geopolitics, the influences of non-state advocacy institutions (e.g. the International Drug Policy Consortium), the positions of other international bodies (e.g. the World Health Organization), the happenstances of electoral or other power transfer cycles, and the particular personalities of the people who attended CND. As Gholiagha et al. (2020) notes, 'agency matters.' We offer the results of our QCA as a contribution to thinking about one part of the complex range of factors that influence countries' alliances and policy positions at international meetings. We find it interesting, and potentially useful, to know that the presence or absence of emancipative values (at least outside Latin America) can provide an explanation of the pattern of the spaces countries occupy in the drug policy field.

The importance of emancipative values to the explanation of constellation membership points toward a possible explanation of the wider fracturing of the international drug policy debate that Bewley-Taylor (2012) so perspicaciously noted. While some commentators have suggested that values would converge across countries as they become more wealthy and developed (Inglehart, 1997), what the WVS has actually shown is value divergence over time (Jackson & Medvedev, 2024). It is particularly interesting that Jackson and Medvedev's analysis of WVS data from 1981 to 2022 shows the greatest divergence on the dimension of emancipative values. This divergence has come about largely through countries' populations in Oceania, Europe, North America and (to a lesser extent) Latin America becoming more supportive of emancipative values over time, while other countries have not. Our cross-sectional analysis suggests that a country's level of emancipative values influence its representatives to take more or less liberal positions in international drug policy debates. If this is indeed the case, then the apparent increasing divergence in emancipative values may help to explain why the consensus on international drug policy has become increasingly fractured. Some countries (generally, those whose populations have become more supportive of emancipative values) have defected from the prohibitionist Vienna consensus.

The role of Latin American countries, and especially Colombia, in recent international drug policy debates

is particularly noteworthy. In the last decade, a smaller constellation of Latin American states—notably Colombia, Mexico, Brazil and Bolivia—has advanced positions that stress indigenous rights and alternative approaches to drug regulation. At the CND 2024, Colombia assumed a leading role in coordinating efforts to insert more liberal and progressive ideas into international debates; a role that it maintained at the 2025 CND as well (Fordham & Cots Fernández, 2025). The coca-producing countries, and particularly Bolivia, have demonstrated a readiness to diverge from the prevailing consensus on international drug control (Boister, 2016). Such resistance underscores a broader regional strategy, exemplified by Colombia, of using drug policy debates as a venue to assert agency and signal distinctiveness in international politics (Collins & Alarcón, 2021). A close reading of the statements delivered at the 2024 CND indicates that Colombia was not the only country to seize this opportunity: other states in the region, particularly those assigned to the liberal constellation, also used the forum to push back against prohibitionist orthodoxy and signal alternative visions of regulation. Future research should therefore investigate the particular configurations of domestic and international conditions that animate the actions of Latin American countries in such international fora and shape their willingness to challenge traditional global drug policy norms (von Hoffmann, 2025).

Conclusion

The PCA - and particularly its first and seventh propositions - sensitized us to the powerful role of ethico-political bases in influencing drug policy making, and to the causal role of changes in these cultural structures in changing international drug policy. The analysis we present here supports these theoretical propositions of the PCA and points the way to new empirical possibilities for using them to explain stability and change in international drug policy making.

This has been an exploratory analysis, in that it explores the application of new ways of thinking about and studying international drug policy. Methodologically, it has demonstrated that it is possible to use the theoretical resources of the PCA and the empirical methods of SNA and QCA to reliably identify and provisionally explain policy constellations at the international level of drug policy making. The strong association between our identification of the members of liberal and traditionalist policy constellations and the countries' independent self-sorting into two opposing groups (who supported either the Colombian-led or the Russian-led statement) suggests that the network analysis of policy statements that we have used here provides a reliable method for identifying constellations of actors in international drug policy debates. This may be useful even for situations where there is no such explicit taking of sides.

Substantively, our qualitative comparative analysis (of countries outside Latin America) suggests that the general presence or absence of emancipative values in a country's population may be an important part of the explanation of which countries support which policy positions in international drug policy discussions. This finding is important for targeting of efforts to change international drug policy (or to prevent such changes). It suggests that these efforts will need to attend not just to rational debates about evidence but also to affective persuasion based on underlying moral values. If there is a general swing toward more emancipative values in powerful countries in international drug policy, then further moves toward liberal policies may occur. However, recent political events (such as the election of authoritarian governments in liberal democracies), as well as longer term trends in world values (Jackson & Medvedev, 2024), have shown that such a shift toward more liberal drug policy is neither global nor irreversible. If value divergence deepens, so it is likely that the fracturing of international drug policy will continue.

Notes

1. Harm reduction is a contested term. A narrow definition would limit it to the provision of services (including needle and syringe programmes and opioid agonist treatment), that can limit the harms of drug use even as it continues (Newcombe, 1987). A broader definition includes full recognition of the human rights of people who use drugs, and reduction of the harms done by drug control (HRI, 2022).
2. These recordings were transcribed using otter.ai and then manually corrected to ensure that words in the data were those given as the translation of the words used by the speakers.
3. Previous work on the PCA has brought in ideas and measures from moral foundations theory (Haidt et al., 2009) and Schwartz's (1992) circumplex of basic values. The compatibility between the three approaches to measuring value orientations becomes evident when we think about the congruence between moral foundations like purity/sanctity, basic values like conformity and tradition, and the WVS dimension of sacred-secular. Similarly, the high end of the WVSA dimension of emancipative values is compatible with the basic value of self-direction and the moral foundation of liberty.
4. Choosing a different value for the modularity parameter produces a different number of modules. As is done with other analytical methods for identifying clusters within data (e.g. factor analysis) we chose the

modularity parameter which was most easily interpreted, according to our substantive knowledge and analysis of the sampled cases/counties.

5. Crisp sets are groups of cases that do or do not share a particular characteristic. This can be represented by giving each case a set score of one (for cases that are members of the set that shares the characteristic) or zero (for cases that are not members of the set). A fuzzy set is used to represent uncertainty as to whether cases are members of the set. Cases that are classified as fully in or out of the set are still given set scores of one or zero. But cases that are classified as partial members of the set are given set scores somewhere between one and zero, representing the degree to which they are members of the set. Set scores above 0.5 are given to cases that are considered to be more in than out of the set. Set scores below 0.5 are given to cases that are considered to be more out of than in the set. These set scores are calculated from data about the cases in a process known as calibration.
6. We also ran a QCA after calibrating fuzzy set scores for membership of the constellations, using the E-I index (Krackhardt & Stern, 1988) to measure and then calibrate their degree of membership in each constellation. This produced similar results as reported here, but with lower values for consistency, and higher values for coverage.
7. Our suspicion was confirmed when we carried out the QCA reported here on a dataset that included the Latin American countries. This produced lower values for consistency of the truth table rows than are reported here.
8. As a relationship of necessity is such a strong limit on the explanation of an outcome, QCA tends to use a high consistency threshold for detecting such a relationship (Thiem & Dusa, 2013).
9. In QCA, researchers look for qualitative differences between cases and configurations of causal conditions. We place thresholds for calibration at empty break points in the distribution of values for consistency, in order to identify such qualitative differences. It is common in QCA analysis of relationships of sufficiency to use a threshold for consistency that is at a break point in the distribution of values for consistency that is above 0.7.
10. It would be unusual to use such a low threshold for consistency, but it might be justified by the large gap in consistency between rows 2 and 3 of the truth table in Table 2, and by the fact that all the countries who display this configuration of conditions are also members of the EU who tend to make joint statements at CND, as well as their own country statements.
11. In the QCA for membership of the set of countries that signed the Colombia-led statement, high emancipation values emerges even more strongly than in the analysis of membership of the liberal constellation. The parsimonious solution for membership of the set of countries that supported the Russia-led statement includes low emancipative values AND low secular values.

Acknowledgements

This article is dedicated to the memory of Dave Bewley-Taylor (1968–2024), who did so much to advance understanding of international drug policy. We would like to thank Mark Hill for his work on natural language processing of the policy statements that has informed our analysis, and Grace Tonkin for her work on collating these statements. We also thank Jon Collins and other members of the International Society for the Study of Drug Policy for their advice on earlier versions of this article, as well as Penny Hill and the staff of the International Drug Policy Consortium for their help in understanding CND.

Disclosure of interests

No potential conflict of interest was reported by the author(s).

Funding

The author(s) reported there is no funding associated with the work featured in this article.

Data availability statement

The data from the statements made by countries at the 2024 CND that support the findings of this study are openly available in the University of Sheffield's Online Research Data Archive using the following link: https://doi.org/10.15131/shef.data.30010738.v1.

References

Archer, M. S. (2000). *Being Human: The Problem of Agency*. Cambridge University Press.

Baumgartner, M., & Thiem, A. (2020). Often trusted but never (properly) tested: Evaluating qualitative comparative analysis. *Sociological Methods & Research*, *49*(2), 279–311. Art. 2. https://doi.org/10.1177/0049124117701487

Bewley-Taylor, D. R. (1999). *The United States and international drug control 1909–1997*. Pinter.

Bewley-Taylor, D. R. (2012). *International drug control: Consensus fractured*. Cambridge University Press.

Blondel, V. D., Guillaume, J.-L., Lambiotte, R., & Lefebvre, E. (2008). Fast unfolding of communities in large networks. *Journal of Statistical Mechanics: Theory and Experiment*, *2008*(10), P10008. Art. 10. https://doi.org/10.1088/1742-5468/2008/10/P10008

Boister, N. (2016). Waltzing on the Vienna consensus on drug control? Tensions in the international system for the control of drugs. *Leiden Journal of International Law*, *29*(2), 389–409. https://doi.org/10.1017/S0922156516000078

CND. (2019). Ministerial declaration on strengthening our actions at the nationalregional and international levels to accelerate the implementation of our joint commitments to address and counter the world drug problemCommission on Narcotic Drugs Economic and Social Council.

Collins, J. (2021a). Evaluating trends and stakeholders in the international drug control regime complex. *The International Journal on Drug Policy*, *90*, 103060. https://doi.org/10.1016/j.drugpo.2020.103060

Collins, J. (2021b). *Legalising the drug wars: A regulatory history of UN drug control*. Cambridge University Press.

Fordham, A. (2024). '*Starting here. Starting now'. Pro-reform coalition led by Colombia calls time on failed drug war at UN high level drugs meeting*. IDPC. https://idpc.net/blog/2024/03/starting-here-starting-now-pro-reform-coalition-led-by-colombia-calls-time-on-failed-drug-war-at

Fordham, A., & Cots Fernández, A. (2025). *CND68: Historic vote initiates overdue review of UN drug control "machinery"*. IDPC. https://idpc.net/blog/2025/03/cnd68-historic-vote-initiates-overdue-review-of-un-drug-control-machinery

Gholiagha, S., Holzscheiter, A., & Liese, A. (2020). Activating norm collisions: Interface conflicts in international drug control. *Global Constitutionalism*, *9*(2), 290–317. Art. 2. https://doi.org/10.1017/S2045381719000388

Gootenberg, P., & Campos, I. (2015). Toward a new drug history of Latin America: A research frontier at the center of debates. *Hispanic American Historical Review*, *95*(1), 1–35. https://doi.org/10.1215/00182168-2836796

Haidt, J. (2012). *The righteous mind: Why good people are divided by politics and religion*. Allen Lane.

Haidt, J., Graham, J., & Joseph, C. (2009). Above and below left–right: Ideological narratives and moral foundations. *Psychological Inquiry*, *20*(2-3), 110–119. https://doi.org/10.1080/10478400903028573

Holzscheiter, A., Gholiagha, S., & Liese, A. (2022). Advocacy coalition constellations and norm collisions: Insights from international drug control, human trafficking, and child labour. *Global Society*, *36*(1), 25–48. Art. 1. https://doi.org/10.1080/13600826.2021.1885352

HRI. (2022). *What is harm reduction?* Harm Reduction International. https://www.hri.global/what-is-harm-reduction

Huntington, S. P. (1993). The clash of civilizations? *Foreign Affairs*, *72*(3), 22–49. https://doi.org/10.2307/20045621

Inglehart, R. F. (1997). *Modernization and post modernization: Cultural, economic and political change in 43 societies*. Princeton University Press.

Inglehart, R. F., & Welzel, C. (2023). *WVS cultural map: 2023*. https://www.worldvaluessurvey.org/WVSNewsShow.jsp?ID=467

Jackson, J. C., & Medvedev, D. (2024). Worldwide divergence of values. *Nature Communications*, *15*(1), 2650. https://doi.org/10.1038/s41467-024-46581-5

Jacomy, M., Venturini, T., Heymann, S., & Bastian, M. (2014). ForceAtlas2, a continuous graph layout algorithm for handy network visualization designed for the gephi software. *PloS One*, *9*(6), e98679. https://doi.org/10.1371/journal.pone.0098679

Jelsma, M., Bositer, N., Dewley-Taylor, D. R., Fitzmaurice, M., & Walsh, J. (2018). *Balancing Treaty Stability and Change: Inter se modification of the UN drug control conventions to facilitate cannabis regulation. Policy report 7*. Global Drug Policy Observatory. https://www.wola.org/wp-content/uploads/2018/04/FINAL_Updated.pdf

Kozma, L. (2011). Cannabis Prohibition in Egypt, 1880–1939: From Local Ban to League of Nations Diplomacy. *Middle Eastern Studies*, *47*(3), 443–460. https://doi.org/10.1080/00263206.2011.553890

Krackhardt, D., & Stern, R. N. (1988). Informal networks and organizational crises: An experimental simulation. *Social Psychology Quarterly*, *51*(2), 123–140. https://doi.org/10.2307/2786835

Lasco, G., & Abesamis, L. E. A. (2025). 'Saving the youth': Children and young people as moral subjects in the Philippines' punitive drug regime. *Drugs: Education, Prevention and Policy*, *32*(4), 308–320. https://doi.org/10.1080/09687637.2024.2408486

Los, G. (2023a). Application of the policy constellations framework to the Polish drug policy over the past twenty-five years. *Archiwum Kryminologii*, *44*(2), 65–89. https://doi.org/10.7420/AK2022.07

Los, G. (2023b). Critically explaining British policy responses to novel psychoactive substances using the policy constellations framework. *Drugs: Education, Prevention and Policy*, *Online early*, https://doi.org/10.1080/09687637.2023.2218536

McAllister, W. B. (2000). *Drug diplomacy in the twentieth century*. Routledge.

Mostyn, B. (2024). Drug trafficking as crime against humanity: Global moral panics and drugs at the United Nations. *Critical Criminology*, *32*(3), 649–668. https://doi.org/10.1007/s10612-024-09772-6

Nadelmann, E. (1990). Global prohibition regimes: The evolution of norms in international society. *International Organization*, *44*(4), 479–526. https://doi.org/10.1017/S0020818300035384

Newcombe, R. (1987). High time for harm reduction. *Druglink*, *2*(1), 10–11.

Norris, P., & Inglehart, R. (2011). *Sacred and secular: Religion and politics worldwide* (2nd ed.). Cambridge University Press.

Pettrachin, A., & Hadj Abdou, L. (2024). Beyond evidence-based policymaking? Exploring knowledge formation and source effects in US migration policymaking. *Policy Sciences*, *57*(1), 3–28. https://doi.org/10.1007/s11077-024-09523-y

Ragin, C. C. (2000). *Fuzzy set social science*. University of Chicago Press.

Ragin, C. C. (2008). *Redesigning social inquiry: Fuzzy sets and beyond*. University of Chicago Press.

Rihoux, B., & Ragin, C. (Eds.) (2009). *Configurational Comparative Methods: Qualitative Comparative Analysis and Related Techniques*. Sage.

Ritter, A., & Bunyon, J. (2025). An analysis of scope, topics, methods and categories of drug policy research published in the International Journal of Drug Policy. *The International Journal on Drug Policy*, *145*, 105026. https://doi.org/10.1016/j.drugpo.2025.105026

Sabatier, P., & Jenkins-Smith, H. (1993). *Policy change and learning: An advocacy coalition approach*. Westview Press.

Sabatier, P., & Weible, C. M. (Eds.) (2018). *Theories of the policy process* (4th ed.). Routledge.

Schwartz, S. H. (1992). Universals in the content and structure of values: Theoretical advances and empirical tests in 20 countries. In M. P. Zanna (Ed.), *Advances in experimental social psychology* (Vol. 25, pp. 165). Academic Press. https://doi.org/10.1016/S0065-2601(08)60281-6

Seddon, T. (2023). *Rethinking Drug Laws: Theory, History, Politics*. Oxford University Press, Incorporated.

Stevens, A. (2023). *Online Appendix 1.1: Pluralism, evidence-based policy, and neo-pluralist theories of the policy process*. Drug Policy Constellations: The Website. https://drugpolicyconstellations.pubpub.org/pub/uopriqwo/release/2?readingCollection=278768f3

Stevens, A. (2024). *Drug policy constellations: The Role of power and morality in the making of drug policy in the UK*. Bristol University Press.

Stevens, A., Hill, M., & Krause, F. (2024). *International drug policy constellations at the 2024 Commission on Narcotic Drugs* [Paper presentation]. Presentation to the 17th Annual Conference of the International Society for the Study of Drug Policy, Montreal.

Stevens, A., Ritter, A., & Askew, R. (2025). Studying moralities in drug policy: An editorial introduction. *Drugs: Education, Prevention and Policy*, *32*(4), 293–298. https://doi.org/10.1080/09687637.2025.2498363

Thiem, A. (2018). *QCAPro: Advanced Functionality for Performing and Evaluating Qualitative Comparative Analysis* (Version 1.1-2) [R (≥ 3.0.0)]. University of Lucerne. https://cran.r-project.org/web/packages/QCApro/refman/QCApro.html

Thiem, A., & Dusa, A. (2013). *Qualitative comparative analysis with R - A User's Guide | Springer*. Spriner. http://www.springer.com/us/book/9781461445838

UNDP. (2024). Human development index. In Human Development Reports. United Nations. https://hdr.undp.org/data-center/human-development-index

UN. (1992). *Commission in narcotic drugs: Report of the 35th session*. United Nations.

von Hoffmann, J. (2024). *Squandering the sexenio: Applying drug policy constellations to the failure of marijuana legalization in Mexico (2018-2024)* [Paper presentation].Presentation to the Lisbon Addictions Conference, Lisbon.

Welzel, C. (2013). *Freedom rising: Human empowerment and the quest for emancipation*. Cambridge University Press. https://doi.org/10.1017/CBO9781139540919

Windle, J. (2013). How the East influenced drug prohibition. *The International History Review*, *35*(5), 1185–1199. https://doi.org/10.1080/07075332.2013.820769

WVSA. (2020). *WVS Database*. https://www.worldvaluessurvey.org/wvs.jsp